

Chapter 4

Physical Therapists (PT)/PT Specialists

4-1. Description of Duties.

a. Physical Therapist (65B). Serves as an independent practitioner and physician extender, evaluating, managing and providing treatment to patients for neuromusculoskeletal conditions with and without referral. Plans, implements and supervises physical therapy programs upon referral from medical or dental officer, or other health care professional. Primarily evaluates and treats disorders of human motion through the use of physical therapeutic means. These methods assist the promotion of functional independence, healing and prevent or minimize the disability caused by disease, surgery or trauma. Serves as consultant to commanders and the military community providing guidance within the areas of physical fitness, physical training and injury prevention. Develops and conducts training programs on injury prevention and physical rehabilitation for medical and non-medical personnel. The primary wartime role is to triage, evaluate, and treat soldiers with neuromusculoskeletal conditions to optimize return to duty status in a forward-deployed environment, preventing the need for reconstitution of the force. The role also includes burn and wound care. Supports humanitarian missions by recommending policy and providing management and guidance on preventive and restorative care in support of disaster victims, internally displaced persons, and refugees. (Modified from DA Pam 611-21).

b. Physical Therapy Specialist (91BN9). Administers physical therapy treatment to patients under the supervision of a physical therapist, and manages the physical therapy clinic. In the absence of a physical therapist, the physical therapy specialist will treat patients under the direct supervision of a designated physician. Technical supervision will be provided as needed by the Chief, Physical Therapy of the MTF with the assigned area of responsibility for the physical therapy specialist.

4-2. Roles in Humanitarian Missions.

a. Education. Provide educational services in the areas of health promotion, wellness, fitness and a variety of rehabilitation techniques. These services are available for the HN local population, US Commanders, units, and personnel.

b. Training. Provide training on fitness and rehabilitative techniques for HN personnel.

c. Consulting. Serve as a physical fitness and rehabilitation consultant. The physical therapist can consult on unit pre- and post-deployment physical readiness, injury prevention, health promotion and provide surveillance and analysis of injury trends (rates and mechanisms). These consulting services can be provided to commanders, allied forces and HN medical personnel.

- d. Physician extender. Serve as direct access physician extenders providing triage, diagnosis and treatment of neurological & musculoskeletal trauma.
- e. Force Multiplier. Serve as force multipliers by providing rapid evaluation and treatment of musculoskeletal injuries to optimize return-to-duty (RTD) status in a forward-deployed environment and prevent the need for reconstitution of the force.
- f. Subject Matter Expert (SME). Provide training as a SME to commanders and HN medical personnel on fitness, amputee treatment, burns, musculoskeletal disorders, and other rehabilitative conditions. Training and knowledge exchange can take place in the HN or HN can participate in knowledge exchange in the U.S.
- g. Administration. Serve as Chief, Minimal Care units for a task force, medical liaison officer, and in a variety of other administrative positions.
- h. Triage. Serve as triage officer specializing in orthopedic and neurological conditions.
- i. Pre/Post Deployment Preparedness. Serve on Health Assessment Response Team (HART) to assess pre- and post-deployment needs and physical readiness.
- j. Health Promotion. Serve as health promotion officer to promote wellness, injury prevention, and fitness to maintain readiness. The physical therapist can also provide health promotion services to the HN Ministry of Health and local population.
- k. Injury Prevention. Serve on injury prevention team to provide educational and intervention strategies on prevention of musculoskeletal injuries.

4-3. Humanitarian Missions Physical Therapists/Physical Therapy Specialists Can Support.

- a. Noncombat Evacuation Operation (NEO). Serve as consultant to the command on unit pre- and post-deployment physical fitness and physical readiness, serve as rehabilitation SME for both force and evacuees, and analyze unit injury trends for the command.
- b. Domestic Support Operations. Serve as physician extender to provide preventive and restorative care support to victims, provide triage services specializing in orthopedic and neurological/musculoskeletal conditions. Serve as a force multiplier by providing traditional CHS to employed US Army forces and serve as an administrator, e.g., Chief of Minimal Care Units or other administrative positions. The US Army CHS provided in disaster assistance operations should include physical therapy to provide preventive and restorative care support. (Modified from FM 8-42, Para. 3-3 a 3).
- c. Foreign Humanitarian Assistance. Serve as part of the education team to educate on injury prevention and intervention strategies for the HN population and unit commanders, exchange knowledge with HN medical personnel on a variety of rehabilitative conditions,

i.e., amputees and burns. The physical therapist serves as physician extender, providing preventive and restorative care support to victims and providing traditional CHS to U.S. forces. The physical therapist can also provide triage services specializing in orthopedic and neurological conditions and serve as an administrator, e.g., Chief, Minimal Care Units or other administrative positions.

d. Security Assistance. Serve as SME, consult and educator on rehabilitation and restorative care support as part of the Department of State cultural exchange program.

e. Nation Assistance. Serve as SME, consult, educator and trainer to share knowledge and new techniques in the area of rehabilitation and restorative care to the populace in urbanized and rural areas.

f. Peace Support Operations. Serve as a physician extender and force multiplier to the peacekeeping force. Providing rapid evaluation and treatment of neurological/musculoskeletal conditions to optimize RTD status. Physical therapist can also serve as consultants to the task force commander on overall unit fitness and injury prevention.

g. Show of Force. Serve as a physician extender providing rapid evaluation and treatment of neurological/musculoskeletal conditions to optimize RTD status. Physical therapist can also serve as consultants to the peacekeeping force commander on overall unit fitness and injury prevention.

h. Support for Insurgencies and Counterinsurgencies. Serve as consultants on the status of HN military medical infrastructure and capabilities. The physical therapist can also share knowledge and new techniques in the area of rehabilitation and restorative care to help support the HN military medical infrastructure (Modified from FM 8-42, Para. 3-11 b 4).

i. Attacks and Raids. Serve as a physician extender for allied forces and enemy prisoners of war (EPW). Train EPW medical personnel to provide rehabilitative services for EPWs.

4-4. Physical Therapy Training Opportunities.

- a. COL Doug Kersey Neuromusculoskeletal Evaluation (NMSE) Course
- b. Navy Epidemiological Surveillance Course
- c. CHPPM Ergonomics Course
- d. Burn Course
- e. Advance Spine Course
- f. Triage Home Study Course
- g. Advanced Trauma Life Support (ATLS)
- h. Advanced Cardiac Life Support (ACLS)
- i. Army Training and Evaluation Program (ARTEP)

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